# IN THE UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF TENNESSEE

IN RE:

**CASSIE MONIQUE LEHMAN** 

CASE NO. 3:15-BK-07071

DEBTOR.

**CHAPTER 13** 

#### NOTICE OF AMENDED SCHEDULES I & J

Comes now the Debtor, by and through counsel, and hereby submits an Amended Schedules I &

J. Schedules I & J were updated to reflect additions in the Debtor's self-employment income.

Dated on February 5, 2016

Respectfully submitted,

/s/Jennifer L. Johnson

Jennifer L. Johnson (TN BPR #030779) Long, Burnett & Johnson, PLLC 302 42<sup>nd</sup> Avenue North Nashville, TN 37209 T: 615-386-0075 F: 615-864-8419 jjohnson@tennessee-bankruptcy.com

Attorney for Debtor

Fill in this informati	on to identify your case:	
Debtor 1	Cassie Monique Lehman	
Debtor 2 (Spouse, if filing)		
United States Bank	kruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE	
_	3:15-bk-07071	Check if this is:
(If known)		An amended filing
		☐ A supplement showing post-petition chapter
Official For	rm B 6I	13 income as of the following date:

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status\*** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Out Reach Corinator** Cook Include part-time, seasonal, or **Employer's name End the Struggle, LLC** O'Charley's self-employed work. Occupation may include student **Employer's address** 4025 Cody Drive 3038 Sidco Dr or homemaker, if it applies. La Vergne, TN 37086 Nashville, TN 37204 How long employed there? 2 weeks 1 year \*See Attachment for Additional Employment Information

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 2,166.67 \$ 2,019.33

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 2,166.67 \$ 2,019.33

Debt	tor 1	Cassie Monique Lehman	_	Cas	e number (if kr	nown)	3:15-bl	k-07071	
	Сор	by line 4 here	4.	Fo \$	or Debtor 1 2,166	5.67		ebtor 2 or ing spouse 2,019.33	
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ _ \$ _ \$ _ \$ _	0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	343.29 0.00 0.00 0.00 0.00 0.00 0.00	- - - - -
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	C	0.00	\$	343.29	_
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,166	6.67	\$	1,676.04	_
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8c. 8d. 8e.	\$ _ \$ _ \$ _ \$ _	0	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	- - - -
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	C	0.00	\$	0.0	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$	<u> </u>	2,166.67	+ \$_	1,676	5.04 = \$	3,842.71
11.	Incluothe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	r deper		, ,		•	<i>edule J.</i> 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies						12. \$ Combinemental	3,842.71 ned y income
13.	Do y □ ■	you expect an increase or decrease within the year after you file this form No.  Yes. Explain: Debtor's self employment income has increased		new	contacts	and r	each ou		
	_	Debtor is receiving increased income sufficient							,

Debtor 1 Cassie Monique Lehman

Case number (if known) 3:15-bk-07071

## Official Form B 6I **Attachment for Additional Employment Information**

Spouse		
Occupation	Cook	
Name of Employer	Hickory Falls	
How long employed	1 year	
Address of Employer	_	

Fill	in this information to identify your case:				
Deb	tor 1 Cassie Monique Lehman		Che	eck if this is:	
	<u> </u>			An amended filing	
	ouse, if filing)			A supplement show 13 expenses as of	ving post-petition chapter the following date:
Unit	ed States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESS	SEE		MM / DD / YYYY	
	e number			A separate filing for 2 maintains a separate	Debtor 2 because Debtor rate household
Of	fficial Form B 6J				
	chedule J: Your Expenses				12/13
info nur	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this funder (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	<ul><li>☐ No</li><li>☐ Yes. Debtor 2 must file a separate Schedule J.</li></ul>				
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	hip to	Dependent's age	Does dependent live with you?
	Do not state the dependents' names.	Son		14 years	□ No ■ Yes
		Daughter		16 years	□ No ■ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
	expenses of people other than yourself and your dependents?				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your banks as of a date after the bankruptcy is filed. If this is a supplipable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Yo</i> ficial Form 6I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	925.00
	If not included in line 4:				·
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4a. 4b.	·	0.00 0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	•	0.00
	4d. Homeowner's association or condominium dues		4d.	\$	0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5.	\$	0.00

Debtor 1	Cassie Monique Lehman	Case num	ber (if known)	3:15-bk-07071
6. Uti	lities:			
6a.		6a.	\$	180.00
6b.	Water, sewer, garbage collection	6b.	\$	160.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	400.00
6d.	Other. Specify:	6d.	\$	0.00
7. <b>Fo</b>	od and housekeeping supplies		\$	500.00
8. <b>Ch</b> i	ildcare and children's education costs	8.	\$	50.00
9. <b>Cl</b> o	othing, laundry, and dry cleaning	9.	\$	25.00
	rsonal care products and services	10.	\$	25.00
	dical and dental expenses	11.	\$	200.00
	insportation. Include gas, maintenance, bus or train fare.		· <del></del>	
	not include car payments.	12.	\$	200.00
13. <b>Ent</b>	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14. Ch	aritable contributions and religious donations	14.	\$	0.00
15. <b>Ins</b>	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	a. Life insurance	15a.	\$	0.00
15b	b. Health insurance	15b.	\$	0.00
150	c. Vehicle insurance	15c.	\$	125.00
150	d. Other insurance. Specify:	15d.	\$	0.00
16. <b>Ta</b> x	<b>kes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	ecify: Income Tax Not deducted from Debtor	16.	\$	162.00
17. <b>Ins</b>	tallment or lease payments:			
17a	a. Car payments for Vehicle 1	17a.	\$	0.00
17b	o. Car payments for Vehicle 2	17b.	\$	0.00
170	c. Other. Specify:	17c.	\$	0.00
170	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as	3 40	•	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Sch			
	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.		0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
20€	e. Homeowner's association or condominium dues	20e.	\$	0.00
21. Oth	ner: Specify:	21.	+\$	0.00
	ur monthly expenses. Add lines 4 through 21. e result is your monthly expenses.	22.	\$	3,002.00
	culate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,842.71
	o. Copy your monthly expenses from line 22 above.	23b.	·	3,002.00
200				3,002.00
230	<ul> <li>Subtract your monthly expenses from your monthly income.</li> <li>The result is your monthly net income.</li> </ul>	23c.	\$	840.71
For mod	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?  No.			ease or decrease because of a
	Yes.			